Village of St Nazianz Direct Payment Form

Starting October 20, 2018 we are pleased to offer you a new service – the Direct Payment Plan. Now you can have your utility payment deducted automatically from your checking or savings account. And, you won't have to change your present banking relationship to take advantage of this service.

The Direct Payment Plan will help you in several ways:

- It saves time fewer checks to write.
- Helps meet your commitment in a convenient and timely manner even if you're on vacation or out of town.
- No lost or misplaced statements, your payment is always on time it helps maintain good credit.
- It saves postage.
- It's easy to sign up for, easy to cancel.
- No late charges.

Here's how the Direct Payment Plan works:

You authorize regularly scheduled payments to be made from your checking or savings account. Then, just sit back and relax. Your payments will be made automatically on the specified day. And proof of payment will appear with your statement.

The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. If the amount of your payment changes, we will notify you at least 10 days before payment date.

The Direct Payment Plan is dependable, flexible, convenient and easy. To take advantage of this service, complete the attached authorization form and return it to the Village Office by mail for put in the drop box at 110 Colonial Drive.

All you need to do is:

- 1. Check the box to indicate whether your payment will be deducted from your checking or savings account.
- 2. Fill in the date, your name and financial institution information.
- **3.** Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please fill in your account number and routing number.

AUTHORIZATION FOR DIRECT PAYMENT

| I authorize the Villag | ge of St Nazianz to initiate | e electronic debit entries to my: |
|------------------------|------------------------------|---|
| | □ checking account | □ savings account |
| origination of ACH t | | eceive a notice if the amount changes. I acknowledge that the it must comply with the provisions of U.S. law. This authority writing. |
| Date | | Name (Please Print) |
| Financial Institution | Name (Please Print) | |
| Financial Institution | City and State | |
| Account Number at I | Financial Institution | |
| Financial Institution | Routing/Transit Number (| (ABA) |
| | | Signature of Authorized Signer |

PLEASE KEEP A COPY OF THE AUTHORIZATION FOR YOUR RECORDS

Return Completed forms to: Village of St Nazianz PO Box 302 St Nazianz WI 54232 920-773-2471